Fradication of Hepatitis-B

†1740. SHRI SWARAJ KAUSHAL: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether there is any proposal under Government's consideration to launch a Hepatitis-B eradication campaign as in the case of polio;

(b) if so, the details therof; and

(c) by when a final decision is likely to be taken in this regard?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI N.T. SHANMUGAM): (a) No, Sir.

(b) and (c) Questions do not arise.

Control of Communicable and Non-Communicable Diseases

1741. DR. JAGANNATH MISHRA: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) the performance of Bihar, Madhya Pradesh and Rajasthan and Uttar Pradesh in achieving targets set out for control of communicable and non-communicable diseases; and

(b) the schemes and programmes being undertaken in the Ninth Five Year Plan for provision of health infrastructure in the above States?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI N.T. SHANMUGAM): (a) The performance under the various National Health Programmes is as follows:

1. Achievement under National Anti Malaria Programme

The annual physical target of operational performance under the National Anti Malaria Programme (NAMP) is Annual Blood Examination Rate (ABER) of 10% i.e., annual screening of a minimum 10% of the total population for malaria by preparation of

†Original Notice of the Question was received in Hindi.

blood smears. State-wise number of cases detected and treated and percentage of the physical target i.e., ABER, achieved during 1998-99 is given below:

State/UT	Population (in 000s)	Population screened for malaria	Malaria cases Detected and treated
Bihar	104128	1030699	73937
Madhya Pradesh	78242	10443718	441047
Rajasthan	44006	4977977	76438
Uttar Pradesh	132666	7042000	107525

2. Achievement under National Leprosy Eradication Programme

Target and Achievement for the year of 1998-99

	Detection		Discharge	
Name of the State	Target	Achieve-ment	Target	Achieve-ment
Bihar	64700	277336	120000	201392
Madhya Pradesh	522000	56319	60000	53588
Rajasthan Uttar	850	2797	8000	3538
Pradesh	65000	107632	100000	97309

3. Achievement under National Tuberculosis Programme

The figures relate to achievement in case detection for the year 1998-99

State	Target	Achievement
Bihar	127805	27770
Madhya Pradesh	101987	78390
Rajasthan Uttar	68475	52072
Pradesh	215478	262739

4. Achievement under Blindness Control Programme

The figures relate to Cataract Operations for the year 1998-99

State	Target	Achievement
Bihar	192500	110121
Madhya Pradesh	308000	287201
Rajasthan	197200	176955
Uttar Pradesh	413200	472029

5. Achievement under National AIDS Control Programme for the year 1998-99

* Establishment of State AIDS Control Societies in the state of Madhya Pradesh, Uttar Pradesh, Rajasthan and Bihar
* Strengthening of Sexually Transmitted Diseases Clinics, M.P.-50, Bihar-70, Uttar Pradesh-44 and Rajasthan-14
* Modernization of Blood Banks for Blood safety; Bihar-51, M.P.-49, Rajasthan-18 and U.P.-68
* Establishment of Blood Testing Centres; Bihar-10, M.P.-09, Rajasthan-06 and U.P.-13
* Establishment of Zonal Blood Testing Centres; Bihar-09, M.P.-10, Rajasthan-6 and U.P.-ll
* Training of Medical Officers has been taken by the State of Uttar Pradesh, Madhya Pradesh, Rajasthan and Bihar
* For generating awareness among rural and urban areas of these states various multimedia approach has been used.

6. The Guinea Worm Eradication (GWEP) was taken up in endemic areas of Madhya Pradesh and Rajasthan in addition to 5 more states in the country. Because of the successful implementation of the programme zero disease status was achieved in August, 1996 in the country.

7. Yaws Eradication Programme (YEP) has also been taken up in the endemic areas of Madhya Pradesh, Uttar Pradesh and Bihar. No specific targets have been set.

8. National Surveillance Programme for Communicable Diseases (NSPCD) has been launched by Government of India for early detection and rapid response to outbreaks of communicable diseases through capacity building at district level. The strengthening of surveillance mechanism would also help to improve the effectiveness of existing programmes of communicable diseases. The programme activities have been taken up in two districts of Bihar, three districts of Uttar Pradesh and Rajasthan each, four districts of Madhya Pradesh uptil 1998-99. No specific targets have been fixed. It is proposed to cover 1Q0 districts in all the States and UTs during the 9th Plan period under NSPCD.

(b) For health infrastructure the following targets have been set in the 9th Plan in respect of these four States as given below:—

Health Infrastructure in 9th Plan	Bihar	Uttar Pradesh	Rajasthan	Madhya Pradesh
Community Health Centre	511	621	51	307
Sub Centres	1026	2184	nil	184
Primary Health Centres	428	nil	nil	206

These targets do not imply construction of new buidligs. These provide for establishment of facilities by appropriately strengthening/ upgrading existing institutions and by redeployment of manpower. Construction is to be underaken only where absolutely essential.

Eradication of Leprosy

1742. DR. GOPALRAO VITHALRAO PATIL: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Government are aware that India tops the list of 12 most leprosy-endemic nations, which shares 90% of the global leprosy incidence;